

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 13 OF 18

|   |                              |                              |                              |
|---|------------------------------|------------------------------|------------------------------|
| <input type="checkbox"/> 17             | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input checked="" type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)  
Bernie Moreno for Ohio

Full Name (Last, First, Middle Initial)

**A. SCHOTTENSTEIN, JEANNIE, , ,**

Mailing Address 4300 E 5TH AVE

City  
COLUMBUSState  
OHZip Code  
43219-1816Purpose of Disbursement  
VOID OF PREVIOUS NOT RECEIVED

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☐ Primary ☒ General  
☐ Other (specify) ▼ GENERAL

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04  |   | 19  |   | 2022    |

FEC Identification Number

C

Amount of Each Disbursement this Period

- 2900.00

Transaction ID : SB20A.I1211

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. SCHOTTENSTEIN, JEANNIE, , ,**

Mailing Address 4300 E 5TH AVE

City  
COLUMBUSState  
OHZip Code  
43219-1816Purpose of Disbursement  
CHECK RECUT- 2/8/22

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☐ Primary ☒ General  
☐ Other (specify) ▼ GENERAL

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04  |   | 19  |   | 2022    |

FEC Identification Number

C

Amount of Each Disbursement this Period

2900.00

Transaction ID : SB20A.I1212

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
|     |   |     |   |         |

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

0.00

TOTAL This Period (last page this line number only).....▶

0.00